



United States Congresswoman Gloria Negrete McLeod

PRIVACY ACT CONSENT FORM

The provisions of **Public Law 93-579** (Privacy Act of 1974) prohibit the disclosure of information of a personal nature from the files of an individual without their consent.

Accordingly, I authorize the staff of Congresswoman Gloria Negrete McLeod to access any and all of my records that relate to the problem stated below.

Signature: _____ **Date:** _____

To begin processing your case, please complete all of the following information:

Circle One: Mr. Mrs. Miss Ms Address: _____
First Name: _____ City: _____
Last Name: _____ State: _____ ZIP _____
Date of Birth: _____ Email _____
Social Security#: _____ Phone Number: _____

Federal agency with which you need help: _____
Briefly explain the problem or the information desired* (attach additional pages if necessary):

*Please include copies of any relevant documentation related to your request as attachments to this form.

Also include the following information if appropriate.

IMMIGRATION

Alien Registration # _____
Priority Date: _____
Form #: _____
Date filed: _____
USCIS Receipt #: _____
Embassy Case #: _____

OTHER

EEO Charge # _____
EEOC Charge # _____
Student Lender Name: _____
OPM CSA #: _____

MILITARY:

Branch of Service: _____
Rank: _____
VA File Number: _____
VA Office of Medical Center: _____

Please list any other Congressional offices that you have contacted about this issue:

District Office

4959 Palo Verde | Montclair, CA 91763
(O) 909.626.2054 | (F) 909.626.2678

Capitol Office

1641 Longworth HOB | Washington, DC 20036
(O) 202.225.6161 | (F) 202.225.8671